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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/159,481			ling Date 23/1998	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN	
FOR			NUMBER FI	.ED N	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A			N/A		
SEARCH FEE (37 CFR 1.16(k), (f), or (m))			N/A		N/A		N/A			N/A		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A		N/A		N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =				x \$ =		OR	x \$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 = *			1	x \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is \$	ets of pap 250 (\$125 litional 50	ings exceed 100 tion size fee due y) for each on thereof. See 7 CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		1	TOTAL		
APPLICATION AS AMENDED – PART II         OTHER THAN           (Column 1)         (Column 2)         (Column 3)         SMALL ENTITY         OR         SMALL ENTITY												
AMENDMENT	01/08/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 50	Minus	·· 50	= 0	1	x s =		OR	X \$50=	0	
	Independent (37 CFR 1,16(h))	٠6	Minus	6	= 0	]	x \$ =		OR	X \$200=	0	
ME	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)												
<sub>⊢</sub>		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ä	Total (37 CFR 1,16())	*	Minus	**	=	]	x s =		OR	x \$ =		
Δ	Independent (37 CFR 1.16(h))	•	Minus	***	=	]	x \$ =		OR	x \$ =		
AMENDMENT	Application Size Fee (37 CFR 1.16(s))					ı			1			
Α	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						TOTAL		OR			
									OR	TOTAL ADD'L FEE		
** If	"If the entry in column 1 is less than the entry in column 2, write "o" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.											

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